

# Arizona Nutrition Network



Fowler District Teacher Time Form  
April 2009

Name: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_ Number of Students: \_\_\_\_\_

Week 1	April 1-3	I spent _____	hours this week preparing for or teaching nutrition.
Week 2	April 6-10	I spent _____	hours this week preparing for or teaching nutrition.
Week 3	April 13-17	I spent _____	hours this week preparing for or teaching nutrition.
Week 4	April 20-24	I spent _____	hours this week preparing for or teaching nutrition.
Week 5	April 27-30	I spent _____	hours this week preparing for or teaching nutrition.

*Please circle the number of times you taught the following topic(s) in your classroom. . If you taught a topic more than 10 times, please write the number of times in the blank.*

Times Taught											Nutrition/Physical Activity Topic
1	2	3	4	5	6	7	8	9	10	_____	Benefits of Physical Activity (I)
1	2	3	4	5	6	7	8	9	10	_____	Fat and Oils (B)
1	2	3	4	5	6	7	8	9	10	_____	Fiber-Rich Foods (C)
1	2	3	4	5	6	7	8	9	10	_____	Food Shopping/Preparation (D)
1	2	3	4	5	6	7	8	9	10	_____	Fruit and Vegetables (E)
1	2	3	4	5	6	7	8	9	10	_____	Hand Washing/Food Safety (M)
1	2	3	4	5	6	7	8	9	10	_____	Lean Meat and Beans (F)
1	2	3	4	5	6	7	8	9	10	_____	Limit Added Sugars (G)
1	2	3	4	5	6	7	8	9	10	_____	Fat Free and Low Fat Milk (A)
1	2	3	4	5	6	7	8	9	10	_____	MyPyramid- Healthy Eating Plan (H)
1	2	3	4	5	6	7	8	9	10	_____	Promote Healthy Weight (J)
1	2	3	4	5	6	7	8	9	10	_____	Sodium and Potassium (K)
1	2	3	4	5	6	7	8	9	10	_____	Whole Grains (L)

*Please indicate the range of time spent teaching nutrition in a single session.*

## Estimated Duration

Shortest: \_\_\_\_\_ minutes

Longest: \_\_\_\_\_ minutes

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Turn Teacher Time in by May 6<sup>th</sup> and earn a Nutrition Education Tool (NET)!**